

portions and lobes of the encephalon if these impede the approach to the lesion.

THE VENTRICLES.

In this connexion, namely, procedures necessary for the examination of the deeper portions of the brain, a few moments must be devoted to the matter of exploration of the ventricles.

Considering that for 1,400 years (as we know historically) the lateral ventricles were looked upon as the most important part of the brain, inasmuch as the animal spirits, or, as we should now say, nerve energy, originated therein, it is not surprising to find that special danger was supposed to attend their opening or surgical interference. Undoubtedly their continued drainage exposes the patient to the particular risk of sepsis, but apart from this there is no reason why they should not be freely dealt with like other parts of the brain, opened and portions of their wall removed as the case may require, provided that one precaution is taken, namely, that blood is prevented from flowing into the ventricular cavity. This, of course, may be obviated at the time of operation by a simple plug, and when the removal of the lesion is completed a temporary tampon is left in for twenty-four hours, by which time all the oozing vessels are thrombosed. I may, perhaps, on this question draw attention again to my paper of 1893, because the case therein referred to of death by intraventricular filling was an instance of persistent oozing gradually forcing its way through the softened roof of the unopened ventricle.

PROCEDURES IN THE TREATMENT OF MALIGNANT DISEASE OF THE ENCEPHALON.

The analysis of the Queen Square cases also brings out in very strong relief the fact that where the technique of intracranial operations fails most is the treatment of malignant disease. This, therefore, will fitly form the last chapter of our considerations. All tumours which, growing from the meninges, penetrate the brain, or which are encapsulated, such as fibromata, myxomata, can all be excised with a good permanent result (see Figs. 15 and 16, Plate 4). The comparison between simple and malignant disease is well shown in the accompanying table of 53 tumours, cases in which the patients' histories have been followed up to date.

Queen Square Cases. Recurrence Table of 55 Tumours.

Glioma	19	} 23	Recurrence within 2 years, 20.
Sarcoma	4		
Endothelioma.....		8	{ 1 recurrence 3 years later; died of valvular heart disease. 7 alive well, longest 5 years.